## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

|  |   |  |  |   |  | 1)-273-2885  |  |   |   |                                      |  |
|--|---|--|--|---|--|--|--|---|---|--------------------------------------|--|
| INSTRUCTIONS: This I<br>appropriate. All further c<br>indicated unless corrected<br>maintenance fee notificati   | orm should be used for<br>orrespondence including<br>to below or directed oth<br>ons.   | or trans<br>ig the P<br>ierwise  | mitting the ISSU<br>atent, advance of<br>in Block 1, by (a                                     | JE FEE and PUBLIC<br>rders and notification<br>a) specifying a new c  | of n                                   | ON FEE (if requirements of the control of the contr | ired). I<br>vill be<br>and/or                  | Blocks 1 through 5 s<br>mailed to the current<br>(b) indicating a sep   | hould be completed w<br>correspondence address<br>arate "FEE ADDRESS"   | here<br>is as                        |  |
| CURRENT CORRESPONDENCE ADDRESS (Nove: Use Block I for any change of address)   |   |  |  |   |  | Note: A certificate of mailing can only be used for domestic mailings of the<br>Fee(s) Transmittal. This certificate cannot be used for any other accompanying<br>papers. Each additional paper, such as an assignment or formal drawing, must<br>have its own certificate of mailing or transmission.   |  |   |   |                                      |  |
| 60429  | 7590 09/24  | 2010   |  |   | nave                                   |  |  | -   |   |                                      |  |
| CAMPBELL ST<br>11401 CENTURY<br>BLDG. II, SUITI  |   | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposite States Postal Service with sufficient postage for first class m addressed to the Mail Stop ISSUE FEE address above, or transmitted to the USPTO (571) 273-2885, on the date indice. |  |   |  | a deposited with the He  | ited<br>lope<br>mile                           |   |   |                                      |  |
| AUSTIN, TX 787   | 758   |  |  |   | E                                      | ric A. Step  | nensc  | n   | (Depositor's m  | ıme)                                 |  |
|  |   |  |  |   |  |  |  |   | (Signs  | tuc)                                 |  |
|  |   |  |  |   |  |  |  |   | a   | Date)                                |  |
| APPLICATION NO.  | APPLICATION NO. FILING DATE   |  |  | FIRST NAMED INVENTOR  |  |  | лтто   | RNEY DOCKET NO.   | CONFIRMATION NO   | =                                    |  |
| 10/790,656   | 10/790.656 03/01/2004   |  |  | Chirag D. Dalal   |  |  |  | VRT0126US   | 9561  | _                                    |  |
| TITLE OF INVENTION LAYERS  | : USING A SINGLE  | A1.1.O   | CATOR TO CO  | OORDINATE VOLU  | МΕ                                     | TRANSFORMAT  | ions   | ACROSS VIRTUAL  | IZATION   |                                      |  |
| APPLN, TYPE  | SMALL ENTITY  | ISSUE FEE DUE  |  | PUBLICATION FEE DUE   |  | PREV. PAID ISSU  | E PEE  | TOTAL FEE(S) DUE  | DATE DUE  |                                      |  |
| nonprovisional   | ко  | NO SI  |  | \$0   |  | \$0  |  | \$1510  | 12/27/2010  |                                      |  |
| EXAMINER   |   |  | ART UNIT   | CLASS-SUBCLASS  | s                                      | 1  |  |   |   |                                      |  |
| LI, ZHUO II 2185   |   |  |  | 711-170000  |  | •  |  |   |   |                                      |  |
| I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53).  Change of correspondence address (or Change of Correspondence Address form FTO/SB/12) attached.  "Fee Address indication (or 'Fee Address' Indication form FTO/SB/12, Rev 03-02 or more recent) attached. Use of a Customer Number is required. |   |  |  | 2. For printing on the pusen front page, list (I) the names of up to 3 registered patent alterneys or agents OR, alternatively, (2) the name of a single firm thirving as a member a 2 registered patent attorings or agents. If no name is listed, no name will be printed.  |  |  |  |   |   |                                      |  |
| 3. ASSIGNEE NAME AN  |   |  |  |   |  |  |  |   |   | Т                                    |  |
|  |   | ified be<br>pletion o  | low, no assignce<br>of this form is NO   |   |  |  |  |   | document has been filed   | I for                                |  |
| (A) NAME OF ASSIG  | (B) RESIDENCE: (CITY and STATE OR COUNTRY) Mountain View, California USA  |  |  |   |  |  |  |   |   |                                      |  |
| Symantec Oper  | ating Corporat  | ion  |  | MOUNTAIN V  | 164                                    | v, Californi   | a o  | SA  |   |                                      |  |
| Please check the appropria   | ate assignee category or  | catego   | ries (will not be p  | rimed on the patent):   |  | Individual 🖺 C   | orporat  | ion or other private gr   | oup entity Governs  | neni                                 |  |
| 4a. The following fee(s) are submitted:    Issue Fee   |   |  |  | B. Payment of Feeds): (Pleuse first reapply any previously paid issue fee shown above)    A check is enclosed.   Payment by credit card. Form PTO-2038 is attached.   The Director is hereby authorized to charge the required feets), any defliciency, or credit any overpayment, to Deposid Account Number 5 2023 6 (enclose an extra copy of this form). |  |  |  |   |   |                                      |  |
| 5. Change in Entity State  | -   | d abou   |  | overpayment, to   | Depo                                   | sit Account Numb   | er _50   | 2306 (enclose   | an extra copy of this for   | m).                                  |  |
| a. Applicant claims  | SMALL ENTITY state  | us. See :  | 37 CFR 1.27.   |   |  |  |  | TTTY status. See 37 C   |   |                                      |  |
| NOTE: The Issue Fee and<br>interest as shown by the re   | Publication Fee (if req<br>reords of the United St  | uired) w<br>ites Pate  | ill not be accepte<br>at and Trademari   | d from anyone other t<br>k Office.  | han (                                  | the applicant; a reg   | istered  | attorney or agent: or t   | he assignce or other par  | ty i                                 |  |
| Authorized Signature   | 9,11  | 5  | _  |   |  |  | /ı.//  |   |   |                                      |  |
| Typed or printed name  |   |  | Registration :   |   |  |  |  |   |   |                                      |  |
| This collection of informa<br>an application. Confident<br>submitting the completed<br>this form and/or suggestion<br>Box 1450, Alexandria, Vi<br>Alexandria, Virginia 223   | ation is required by 37 (<br>iality is governed by 35<br>application form to the<br>ons for reducing this bu<br>rginia 22313-1450. DO | CFR 1.3<br>U.S.C.<br>USPTV<br>rden, sh<br>O NOT  | 11. The informati<br>122 and 37 CFR<br>O. Time will var-<br>ould be sent to if<br>SEND FEES OR | on is required to obtain<br>1.14. This collection<br>of depending upon the<br>the Chief Information of<br>COMPLETED PORM  | n or<br>is es<br>indi<br>Offic<br>4S T | retnin a benefit by<br>timated to take 12<br>vidual case. Any c<br>er, U.S. Patent and<br>O THIS ADDRES  | the pub<br>minute<br>ommen<br>Trader<br>S. SEN | lic which is to file (an<br>s to complete, includi<br>ts on the amount of to<br>mark Office, U.S. Dep<br>D TO: Commissioner | nd by the USPTO to pro<br>ing gathering, preparing<br>time you require to com<br>partment of Commerce,<br>for Patents, P.O. Box 1 | cess<br>, and<br>plete<br>P.O<br>450 |  |

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.